



Fire Suppression Application

Date: _____

Application# _____

(Assigned by Town)

TYPE OF APPLICATION

(Please check)

| | |
|--|--|
| | |
| Fire Alarm | |
| Fire Alarm (Water Flow Monitor) | |
| Standpipe System | |
| Underground Fire Line | |
| Sprinkler | |
| Sprinkler (Single Family Residence) | |
| Other (please specify in description below) | |

Property Owner's Name: _____

Address: _____

Phone: _____ Fax: _____ Cell: _____

Email Address: _____

Applicant Name & Business Name _____

Address: _____

Phone: _____ Fax: _____ Cell: _____

Email Address: _____

PROJECT ADDRESS: _____

Describe work to be done: _____

Square footage to be served _____

Property Owners Signature _____ Date: _____

Permit Amt. \$ _____ Ck# _____ Date Rec'd _____ Receipt # _____

Inspections Needed: _____ Total \$ _____

Total Permit Amt including Inspections: \$ _____